

02-29-00

A

02/28/00  
3c760 U.S. PTO

Please type a plus sign (+) inside this box → ☒

PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No. _____
	First Inventor or Application Identifier _____
	Title _____
	Express Mail Label No. _____

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification [Total Pages <u>14</u> ] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>2</u> ] 4. Oath or Declaration [Total Pages <u>16</u> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
<b>ACCOMPANYING APPLICATION PARTS</b>	
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input checked="" type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other: _____	
<p><b>* NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</b></p>	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No: _____
Prior application information: Examiner _____		Group / Art Unit: _____	

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

### 17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)		<input type="checkbox"/> Correspondence address below	
Name	Joel F. Plotkin		
Address	5508 Greentree Road		
City	Bethesda	State	MD
Country	U.S.A.	Zip Code	20817
Telephone	301-254-5900	Fax	301-564-4006

Name (Print/Type)	Joel F. Plotkin	Registration No. (Attorney/Agent)	
Signature		Date	2/22/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

# FEE TRANSMITTAL

## for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)

### Complete if Known

Application Number

Filing Date

First Named Inventor

Examiner Name

Group / Art Unit

Attorney Docket No.

### METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

Deposit  
Account  
Name

☐ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2. ☒ Payment Enclosed:

☒ Check ☐ Money Order ☐ Other

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	201	690	345	Utility filing fee	345
106	206	310	155	Design filing fee	
107	207	480	240	Plant filing fee	
108	208	690	345	Reissue filing fee	
114	214	150	75	Provisional filing fee	

SUBTOTAL (1) (\$) 345

#### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	20** = 0	X	
3	3** = 0	X	
Multiple Dependent			

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
103	203	18	9	Claims in excess of 20
102	202	78	39	Independent claims in excess of 3
104	204	260	130	Multiple dependent claim, if not paid
109	209	78	39	** Reissue independent claims over original patent
110	210	18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	
127	227	50	25	Surcharge - late provisional filing fee or cover sheet.	
139	239	130	130	Non-English specification	
147	247	2,520	2,520	For filing a request for reexamination	
112	212	920*	920*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	380	190	Extension for reply within second month	
117	217	870	435	Extension for reply within third month	
118	218	1,360	680	Extension for reply within fourth month	
128	228	1,850	925	Extension for reply within fifth month	
119	219	300	150	Notice of Appeal	
120	220	300	150	Filing a brief in support of an appeal	
121	221	260	130	Request for oral hearing	
138	238	1,510	1,510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive - unavoidable	
141	241	1,210	605	Petition to revive - unintentional	
142	242	1,210	605	Utility issue fee (or reissue)	
143	243	430	215	Design issue fee	
144	244	580	290	Plant issue fee	
122	222	130	130	Petitions to the Commissioner	
123	223	50	50	Petitions related to provisional applications	
126	226	240	240	Submission of Information Disclosure Stmt	
581	281	40	40	Recording each patent assignment per property (times number of properties)	
146	246	690	345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	690	345	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

### SUBMITTED BY

Name (Print/Type) Joel F. Plotkin

Registration No.  
(Attorney/Agent)

Signature

*Joel F. Plotkin*

### Complete (if applicable)

Telephone 301-254-5900

Date 2/22/2000

### WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.